

SERFF Tracking Number:	EVST-125843449	State:	Arkansas
Filing Company:	Everest National Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CL-20025699		
TOI:	35.0 Interline Filings	Sub-TOI:	35.0002 Commercial Interline Filings
Product Name:	Commercial Multi Line		
Project Name/Number:	Delay Adoption of ISO/AR-CL-20025699		

Filing at a Glance

Company: Everest National Insurance Company

Product Name: Commercial Multi Line

TOI: 35.0 Interline Filings

Sub-TOI: 35.0002 Commercial Interline Filings

Filing Type: Form

Effective Date Requested (New): 03/01/2009

Effective Date Requested (Renewal): 03/01/2009

State Filing Description:

SERFF Tr Num: EVST-125843449

SERFF Status: Closed

Co Tr Num: AR-CL-20025699

Co Status:

Author: Mary Ellen Boyle

Date Submitted: 10/09/2008

State: Arkansas

State Tr Num: EFT \$50

State Status: Fees verified and received

Reviewer(s): Betty Montesi,
Llyweyia Rawlins

Disposition Date: 10/10/2008

Disposition Status: Approved

Effective Date (New): 03/01/2009

Effective Date (Renewal):

03/01/2009

General Information

Project Name: Delay Adoption of ISO

Project Number: AR-CL-20025699

Reference Organization: ISO

Reference Title: Multistate Interline Forms Revision of Coverage Part
References

Filing Status Changed: 10/10/2008

State Status Changed: 10/10/2008

Corresponding Filing Tracking Number:

Filing Description:

Everest National, a participating insurers of Insurance Services Office (ISO), hereby file to adopt ISO filing designation number

CL-2007-OPR07 without modification. However, due to systems constraints, we need to delay our adoption of this revision until 03/01/2009.

Status of Filing in Domicile:

Domicile Status Comments:

Reference Number: CL-2007-OPR07

Advisory Org. Circular: LI-CL-2008-129

Deemer Date:

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Product Name:	Commercial Multi Line		
Project Name/Number:	Delay Adoption of ISO/AR-CL-20025699		

Company and Contact

Filing Contact Information

Mary Ellen Boyle, Associate Manager	maryellen.boyle@everestre.com
477 Martinsville Road	(908) 604-7233 [Phone]
Liberty Corner, NJ 07938-0830	(908) 604-3526[FAX]

Filing Company Information

Everest National Insurance Company	CoCode: 10120	State of Domicile: Delaware
477 Martinsville Road	Group Code: 1120	Company Type:
P.O. Box 830		
Liberty Corner, NJ 07938-0830	Group Name: Everest Re Group, Ltd.	State ID Number:
(908) 604-3000 ext. [Phone]	FEIN Number: 22-2660372	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Fee is \$50.00 per form filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Everest National Insurance Company	\$50.00	10/09/2008	23073522

<i>SERFF Tracking Number:</i>	<i>EVST-125843449</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Commercial Multi Line</i>		
<i>Project Name/Number:</i>	<i>Delay Adoption of ISO/AR-CL-20025699</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	10/10/2008	10/10/2008

<i>SERFF Tracking Number:</i>	<i>EVST-125843449</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Project Name/Number:</i>	<i>Delay Adoption of ISO/AR-CL-20025699</i>		

Disposition

Disposition Date: 10/10/2008

Effective Date (New): 03/01/2009

Effective Date (Renewal): 03/01/2009

Status: Approved

Comment: File to adopt ISO filing designation number CL-2007-OPR07 without modification. However, due to systems constraints,
need to delay their adoption of revisions until 03/01/2009.

Rate data does NOT apply to filing.

SERFF Tracking Number:	EVST-125843449	State:	Arkansas
Filing Company:	Everest National Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-CL-20025699		
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Product Name:	Commercial Multi Line		
Project Name/Number:	Delay Adoption of ISO/AR-CL-20025699		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes

<i>SERFF Tracking Number:</i>	<i>EVST-125843449</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Everest National Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Approved	10/10/2008
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Comments:

Attachment:

NAIC Transmittal Doc.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
	g. SERFF Filing #:	
h. Subject Codes		

3. Group Name	Group NAIC #
Everest Re Group, Ltd	1120

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Everest National Insurance Company	DE	10120	22-2660372	

5. Company Tracking Number	AR-CL- 20025699
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Mary Ellen Boyle 477 Martinsville Rd Liberty Corner, NJ 07938	Associate Manager	908-604-7233	908-604-3526	Maryellen.boyley@everestre.com

7.	Signature of authorized filer	Mary Ellen Boyle
8.	Please print name of authorized filer	Mary Ellen Boyle

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	Interline
10. Sub-Type of Insurance (Sub-TOI)	Commercial Interline
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	N/A
12. Company Program Title (Marketing title)	N/A
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: 03/01/2009 Renewal: 03/01/2009
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO

17. Reference Organization # & Title	CL-2007-OPR07 Multistate Interline Forms Revision of Coverage Part References
18. Company's Date of Filing	10/9/2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking #	AR-CL-20025699
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21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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22. Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
<p>Check #: EFT Amount: \$50.00</p> <p>Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.</p>



*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**